

aetiology many are in fact genetic in origin, due to recessive inheritance. Primary treatment of deafness is not yet possible, for congenital deafness is still an irreversible condition. Treatment must concentrate on overcoming the disability and here earlier diagnosis and treatment is all-important. Henderson points out that with earlier and more accurate diagnosis an increased proportion of children are being taught as partially deaf and fewer as deaf.

Because of the importance of early diagnosis the discussions of tests of hearing concentrate mainly on babies and very young children. The variety of methods described shows that there is still no generally accepted ideal method. Some differences depend on differences in purpose of the tests, e.g. quick screening tests or the full diagnostic assessment of the otologist. Others depend on the testers' concepts of what is meant by hearing. This fundamental aspect is discussed, as well as the details of what sounds to use and how to estimate the response.

EDITH WHETNALL

Psychotherapy: a dynamic approach

by Paul A Dewald MD

pp xvii + 307 42s

Oxford: Blackwell Scientific Publications 1964

This book is compact although running into 300 pages. It is divided into three sections. Section I deals with general psychoanalytic theory. This part is concentrated but easy to follow. Section II deals with psychopathology and is illustrated with brief clinical examples of the various defence mechanisms that are encountered.

The major part of the book appears in Section III which deals with the theory and technique of psychotherapy. The evaluation of the patient and the indications for supportive treatment as against full analysis are clearly described, as are the different situations met with in treatment.

This book should prove of value to those interested in psychotherapy, especially if they are taking on patients for treatment under supervision.

D W LIDDELL

Clinical Endocrinology

by Laurence Martin MD(Camb) FRCP(Lond)

4th ed pp vii + 306 illustrated 36s

London: J & A Churchill 1964

This deservedly popular and concise textbook of endocrinology has always managed to strike a good balance between the clinical situation and the essential links with both physiology and pathology, and the latest (4th) edition well maintains this tradition. The task of selecting from the last three years' progress the most appropriate new material has been well done. Almost all sections have received some alteration or addition to

bring them up to date, yet the book still remains a very convenient size. The section on the thymus has been omitted, but four fresh ones have been added. One of these reviews endocrine contraception and concludes that it should only be used when other methods of contraception are either ineffective or impossible. A section on the Stein-Leventhal syndrome gives a very fair account of recent views of the endocrine basis of this syndrome.

The value of the recently introduced rapid immunological tests for pregnancy is discussed. Positive results show almost complete reliability like the Hogben tests. But negative results with the new tests prove to be much more reliable than negative Hogben tests, probably because they become positive earlier in pregnancy. In a brief account of the use of metyrapone to test pituitary reserve the advice that urine collections should be continued for four days after giving the drug is wise, but the dose advised is less than the majority of workers employ and is scarcely sufficient to ensure full drug action in every case. Unjustified faith is also shown in the value of urine 17-oxosteroids as a measure of adrenal response to ACTH. But the book is nevertheless an excellent introduction to endocrinology for both students and general clinicians.

C L COPE

Child Health in the Tropics

edited by D B Jelliffe

MD FRCP FAPHA DCH DTM&H

2nd ed pp v + 152 9s

London: Edward Arnold 1964

This excellent distillate by Professor Jelliffe and his high-powered team is designed for medical auxiliaries, nurses, health visitors and paramedical personnel. It is too elementary for practitioners.

How good to see it stated clearly that poor hygiene, poverty, and 'not knowing' (a term I prefer to ignorance) do not cause any special tropical disease but simply disease. Similarly the motto 'not more but better children' pinpoints a problem, though the impossibility, at this stage, of family limitation is admitted.

The tremendous importance of breast feeding is stressed repeatedly, as are the dire consequences of unsophisticated mothers, encouraged by the mass media, emulating their bottle-feeding sisters outside the tropics. The great value of regular weighing is rightly emphasized. The chapter on nutrition (starting with the often forgotten fact that 'infant feeding begins in the uterus') and on all important aspects of malnutrition is excellent. The introduction of high-protein foods in addition to breast milk at 5 or even 3 months is rightly urged.

The chapters on the commonly found childhood illnesses are simple, clear and elegantly compact. Throughout the book the reader is reminded of the vital opportunities for health education afforded in any hospital, clinic, school and local authority's agency.

In the next edition mention might be made of Little's disease, keratomalacia due to absent blink reflex in any ill child, out-patient rehydration centres and the prognosis of the hæmoglobinopathies. Lastly, should tropical prems really receive vitamin K as a routine?

B GANS

Munro Kerr's Operative Obstetrics

7th ed by J Chassar Moir

CBE HONLLD MA MD FRCS(Ed) FRCOG

pp x+1003 illustrated £6 6s

London: Baillière, Tindall & Cox 1964

This is a most impressive book. It is well written, lavishly illustrated and beautifully produced. Originally it was written out of the unrivalled experience of Munro Kerr in Glasgow; now Professor Chassar Moir takes the book into the calmer waters of modern obstetrics, a field in which he too is an acknowledged master. He has been partly or wholly responsible for the revisions of the last three editions, appearing in 1949, 1956 and 1964. This is evidence of its continuing popularity, for the first edition appeared in 1908. There are obvious difficulties in bringing such a work up to date, for it is hard to prune the dead wood but, here, no criticism can be made. There are backward looks to what used to be accepted practice but only to illustrate the evolution of present methods; to follow the course of evolution in this way is educative and instructive. Brief case histories illuminate particular difficulties and it is reassuring to find that not always were the writers splendidly triumphant.

The range of references, over 2,000 of them, is tremendous and views in opposition to the author's are fairly stated and carefully weighed. Nothing is skimmed or glossed over in discussion but Professor Moir never leaves any doubt about his own preferences in treatment nor why he has these preferences. Every postgraduate should read and ought to own this book. In the finer points of operative obstetrics he will refer to it many times in his life.

PHILIP RHODES

Skin Diseases in Africa

by James Marshall MD(London)

pp x+134 illustrated R3

Cape Town: Maskew Miller 1964

In a thoroughly entertaining style this unique essay in epidemiology sets out to draw a picture of the patterns of dermatology seen in the various parts of the huge continent of Africa. The factors

thought important in influencing the incidence of skin disease and then the conditions themselves are considered. The chief conclusions are that race has far less influence on the incidence of dermatoses than is popularly supposed and that the more prosperous the country the nearer does the spectrum of dermatoses approach that seen in Europe or the USA.

It is a pity that comments on dermatoses in South Africa so far outweigh those on all other parts of Africa but perhaps this is difficult to avoid when the information has been collected at Stellenbosch. Some statements leave room for disagreement: for example, it is stated that throughout tropical Africa the leucocyte count is significantly lower in the negro than in the white; that malnutrition probably inhibits viral infections; that erythrasma is rare; that boils may appear in patients on griseofulvin treatment and that pityriasis rosea is spread by fleas. Subcutaneous phycomycosis is mentioned as occurring only in Uganda, yet in the literature are reports from Ghana, Nigeria, Cameroons, Senegal, Ivory Coast and the Sudan.

The appendix contains useful tables on the incidence of dermatoses in various African States as well as in other parts of the world and underlines how little we really know of dermatology in Africa.

The price of 30s is most reasonable, and this is just the book the lucky dermatologist should take to keep him happily interested on the flight to Africa.

R R M HARMAN

Multiple Sclerosis: A Reappraisal

by Douglas McAlpine, Charles E Lumsden

and E D Acheson

pp viii+415 50s

Edinburgh & London: F & S Livingstone 1965

This is a new book and not just a new edition of the older book on multiple sclerosis by two of the authors. It marshalls the known facts regarding its epidemiology, clinical features and laboratory findings.

Dr Acheson's contribution deals with epidemiology; in an excellent and comprehensive review he examines critically the published data on the occurrence of the disease in various parts of the world and the possible implications of its geographical incidence.

Dr McAlpine is responsible for the second part, concerned with the clinical aspects of the disease including such special features as the familial incidence, the questionable role of trauma and the common problem of the differential diagnosis from cervical spondylosis. There is a chapter on treatment and another on the medicosocial problem.